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Date: July 11, 2005

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**FROM: Robyn Wagner**  
**RE: Change of Correspondence Address Request**  
**REF. NO.: CFSTP003**  
**APPLICATION NO.: 09/885,077**  
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**MESSAGE:**

Dear Official Fax Filing:

Please accept the enclosed Power of Attorney by Assignee and Revocation of Previous, Change of Correspondence Address Request, for the above-referenced application.

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PTO/SB/82 (04-05)

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NEW POWER OF ATTORNEY  
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/885,077
Filing Date	June 21, 2001
First Named Inventor	Kevin W. Jameson
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	CFSTP003

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

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☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**Signature 

Name Kevin W. Jameson

Date June 21, 2005

Telephone 408 547 7660

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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